Case: 1:18-cv-01820 Document #: 8 Filed: 04/02/18 Page 1 of 8 PageID #:29



## UNITED STATES DISTRICT COURT NORTHERN DISTRICT OF ILLINOIS EASTERN DIVISION



| Dexter Harris  |   |
|--|---|
| (Enter above the full name of the plaintiff or plaintiffs in this action)  vs.  Michael Kelley  Barbara Gordon   | 1:18-cv-01820 Judge Robert W. Gettleman Magistrate Judge Daniel G. Martin PC-1 Case INO.  (To be supplied by the Clerk of this Court) |
| Jason Prokop   |   |
| Derek Coppes   | RECEIVED  MAR 1 3 2018  |
| Matthew Christopher Cortese  (Enter above the full name of ALL defendants in this action. Do not use "et al.")   | THOMAS G. BRUTON<br>CLERK, U.S. DISTRICT COURT  |
| CHECK ONE ONLY:  |   |
| X COMPLAINT UNDER TO U.S. Code (state, county,   | THE CIVIL RIGHTS ACT, TITLE 42 SECTION 1983 or municipal defendants)  |
| - Carrier Market Control of the Cont | THE CONSTITUTION ("BIVENS" ACTION), TITLE Code (federal defendants)   |
| OTHER (cite statute, if k  | cnown)  |
| BEFORE FILLING OUT THIS COMP<br>FILING." FOLLOW THESE INSTRU   | PLAINT, PLEASE REFER TO "INSTRUCTIONS FOR<br>UCTIONS CAREFULLY.   |

| I.  | Plain   | tiff(s):  |
|-----|---|---|
|     | A.  | Name: Dexter Harris   |
|     | B.  | List all aliases:   |
|     | C.  | My Will County # is  Prisoner identification number: Prison I.D #M18166- 2017-00008356  |
|     | D.  | Place of present confinement:  95 South Chicago Street  |
|     | E.  | Address: Joliet Illinois 60432  |
|     | num   | here is more than one plaintiff, then each plaintiff must list his or her name, aliases, I.D. ber, place of confinement, and current address according to the above format on a rate sheet of paper.) |
| II. | Defendant(s): (In A below, place the full name of the first defendant in the first blank, his or her official position in the second blank, and his or her place of employment in the third blank. Space for two additional defendants is provided in B and C.) |   |
|     | A.  | Defendant: Michael Kelley   |
|     |   | Title: Will County Sheriff  |
|     |   | Place of Employment: Will County Sheriff's Office   |
|     | В.  | Defendant: Barbara Gordon   |
|     |   | Title: Lieutenant Deputy Coordinator  |
|     |   | Place of Employment: Will County Jail   |
|     | C.  | Defendant: Jason Prokop   |
|     |   | Title: Deputy Correctional Sergeant of ERT  |
|     | , ,   | Place of Employment: Will County Jail   |
|     |   | you have more than three defendants, then all additional defendants must be listed ording to the above format on a separate sheet of paper.)  |

Case: 1:18-cv-01820 Document #: 8 Filed: 04/02/18 Page 3 of 8 PageID #:29

## II. Defendant(s):

D. Defendant: Derek Coppes

Title: ERT Officer

Place of Employment: Will County Jail

E. Defendant: Jacob Deane

Title: ERT Officer

Place of Employment: Will County Jail

F. Defendant: Matthew Christopher Cortese

Title: ERT Officer

Place of Employment: Will County Jail

| ш. | List . | ALL lawsuits you (and your co-plaintiffs, if any) have filed in any state or federal<br>t in the United States: |
|----|--------|---|
|    | A.     | Name of case and docket number:   |
|    | B.     | Approximate date of filing lawsuit:   |
|    | C.     | List all plaintiffs (if you had co-plaintiffs), including any aliases:  |
|    |        |   |
|    | D.     | List all defendants:  |
|    |        |   |
|    | E.     | Court in which the lawsuit was filed (if federal court, name the district; if state court, name the county):    |
|    | F.     | Name of judge to whom case was assigned:  |
|    | G.     | Basic claim made:   |
|    | Н.     | Disposition of this case (for example: Was the case dismissed? Was it appealed? Is it still pending?):          |
|    | I.     | Approximate date of disposition:  |
|    |        |   |

IF YOU HAVE FILED MORE THAN ONE LAWSUIT, THEN YOU MUST DESCRIBE THE ADDITIONAL LAWSUITS ON ANOTHER PIECE OF PAPER, USING THIS SAME FORMAT. REGARDLESS OF HOW MANY CASES YOU HAVE PREVIOUSLY FILED, YOU WILL NOT BE EXCUSED FROM FILLING OUT THIS SECTION COMPLETELY, AND FAILURE TO DO SO MAY RESULT IN DISMISSAL OF YOUR CASE. COPLAINTIFFS MUST ALSO LIST ALL CASES THEY HAVE FILED.

## IV. Statement of Claim:

State here as briefly as possible the facts of your case. Describe how each defendant is involved, including names, dates and places. Do not give any legal arguments or cite any case statutes. If you intend to allege a number of related claims, number and set forth each claim in a separate paragraph. (Use as much space as you need. Attach extra sheets if necessary.)

The sole purpose of my claim is of the fact that ERT Officer Derek Coppes unnecessarily and unlawfully used excessive force on me. The excessive use of force consisted of the fact that ERT Officers Matthew Christopher Cortese and Jacob Deane held my legs, torso, and my arms behind my back. While ERT Officer Derek Coppes viciously struck my left eye, my left eye area and the left side of my mouth with a closed fist. He struck me so many times that I lost count. After ERT Officer Derek Coppes struck me with his closed fist he immediately started knee striking me in the area of my left eye. Then ERT Officer Derek Coppes lost all control and jumped on my back and started choking me so hard that I just knew I was going to die because I've never experienced the unconscionable state of mind of a deathly throe by a choke hold. I feel like I'll never recover from this incident from a general stand point. I've developed some kind of uncontrollable twitch in I've never had before prior to this incident. I swear it seem like when ERT Officer Derek Coppes was assaulting me the rest of the staff was just standing there watching to see how far he would go. When ERT Officer Derek Coppes released his choke hold on me he grabbed my testicles and twist them. Then I was sprayed with O.C. For the record this incident of the incident report #2018-0000092/#2018-00000094 happen in the day room on camera on I-Pod in Will County Jail on 1-9-2018. Video and Audio Communication and Brass Communication is available because I requested for the preservation of it through The Freedom of Information Act of this incident. I never resisted not one time through this whole ordeal. I have documents authorized by staff here with conflicting stories with a great deal of contradiction in which some documents indicate that I was never touched while other documents indicate that I was kneed in the face. I knew for a fact that I was a dead man if I would've been in my cell when the ERT came on I-Pod because there no cameras inside the cells. ERT of Will County are known to kill and to try to kill people in this jail. The ERT gave me one order to get down in which I was in the process of doing so. Then they grabbed me and had their way with me which is the basis of my litigation claim. With in my claim is against the supervising staff that consist of Michael Kelley, Barbara Gordon and Jason Prokop for the inadequacy of the supervision of their ERT Officer's Code of Ethics along with their Code of Conduct. As well as in failing to adequately train their ERT Officers due in part to the atrocities of their ERT Officer's conduct in the field when they injured me. With in my claim is against ERT Officers Derek Coppes, Jacob Deane and Matthew Christoper Cortese for Aggravated Assault, Cruel and Unusual Punishment, Violation of my Due Process, Unlawful Excessive Use of Force, Sexual Abuse, Unethical practices, Unethical Code of Conduct.

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|------------|---|-----|----|---|
| V.         | K | eli | еі | : |

| State briefly exactly what you want the court to do for you. Make no legal arguments. Cite no cases or statutes. |  |  |  |  |
|--|--|--|--|--|
| I want to be granted Three Million Dollars of U.S. Currency for my litigation claim against                      |  |  |  |  |
| Will County, Will County J   | ail and the individuals I've named in this claim. For the physical   |  |  |  |
| injuries I've sustained , th   | e psychological beating I had to endure and for the emotional  |  |  |  |
| stress I have to endure for  | the rest of my life because of this incident. These officers made  |  |  |  |
| me squeal for my life.   |  |  |  |  |
|  |  |  |  |  |
| VI. The plaintiff demands  | s that the case be tried by a jury.  YES  NO   |  |  |  |
|  | CERTIFICATION  |  |  |  |
|  | By signing this Complaint, I certify that the facts stated in this Complaint are true to the best of my knowledge, information and belief. I understand that if this certification is not correct, I may be subject to sanctions by the Court. |  |  |  |
|  | Signed this 29th day of January, 2018  |  |  |  |
|  | Dexter Harris  |  |  |  |
|  | (Signature of plaintiff or plaintiffs)  Dexter Harris  |  |  |  |
|  | (Print name)   |  |  |  |
|  | 2017-00008356  |  |  |  |
|  | (I.D. Number)  |  |  |  |
|  | 95 South Chicago Street  |  |  |  |
| •  | Joliet, Illinois 60432   |  |  |  |
|  | (Address)  |  |  |  |

Case: 1:18-cy-01820 Document #: 8 Filed: 04/02/18 Page 7 of 8 Page #:29



## Will County Sheriff's Office Adult Detention Division 95 S. Chicago St. Joliet, IL 60436 Phone (815) 740-5633 Fax (815) 740-5533

January 26, 2018

Dexter Harris 95 S Chicago St Joliet IL 60436

Dear Mr. Harris:

Thank you for writing to the Will County Sheriff's Office with your request for information pursuant to the Illinois Freedom of Information Act, 5 ILCS 140/1 et seq.

On January 22 & January 23, 2018, we received your request for the following;

- Preservation of the audio and video communication.
- Brass communication
- Email Logs of Incident Reports of Incident Number 2018-0000092 of incident on 1-9-18 @ 1530.

Your request is granted in part and denied in part as follows:

Included with this response is email communication regarding the incident in question, also included is your inmate activity log and copies of the reports. The requested information is enclosed, no records have been removed, however, we have redacted unique identifiers as "Private information" means unique identifiers, including a person's social security number, driver's license number, employee identification number, biometric identifiers, personal financial information, passwords or other access codes, medical records, home or personal telephone numbers, and personal email addresses. Private information also includes home address and personal license plates, except as otherwise provided by law or when compiled without possibility of attribution to any person.

Video does exist regarding an incident in IPOD involving you on the date requested and has been preserved, however we are unable to provide you with any copies at this time. Allowing copies of our video showing procedures of how we conduct contact visits, security devices used, internal lay out of the jail, or potential blind spots from the facility camera system could put other detainees as well as staff members in danger. We denied this portion of your request under section 5 ILCS 140/7(1)(e) records that relate to or affect the security of correctional institutions and detention facilities.

You have a right to have the denial of your request reviewed by the Public Access Counselor (PAC) at the Office of the Illinois Attorney General. 5 ILCS 140/9.5(a). You can file your Request for Review with the PAC by writing to:

You have a right to have the denial of your request reviewed by the Public Access Counselor (PAC) at the Office of the Illinois Attorney General. 5 ILCS 140/9.5(a). You can file your Request for Review with the PAC by writing to:

Public Access Counselor Office of the Attorney General 500 South 2<sup>nd</sup> Street Springfield, Illinois 62706

Fax: 217-782-1396

E-mail: publicaccess@atg.state.il.us



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1:18-cv-01820 Judge Robert W. Gettleman Magistrate Judge Daniel G. Martin PC-1



Legal Mail!

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